

10713

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-876)						SERIAL NO. <i>10/823253</i>	FILING DATE				
						APPLICANT(S)					
<i>\$1100</i> CLAIMS											
AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT		IND.	DEP.	IND.	DEP.	IND.	DEP.
1		1				51					
2						52					
3						53					
4						54					
5						55					
6						56					
7						57					
8						58					
9						59					
10						60					
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43						93					
44						94					
45						95					
46						96					
47						97					
48						98					
49						99					
50						100					
TOTAL IND.						TOTAL IND.					
TOTAL DEP.						TOTAL DEP.					
TOTAL CLAIMS						TOTAL CLAIMS					

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MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)							SERIAL NO. <i>101823253</i>	FILING DATE
							APPLICANT(S)	
CLAIMS								
AS FILED	AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT		IND.	DEP.	IND.	DEP.
	IND.	DEP.	IND.	DEP.				
10 1					51			
10 2					52			
10 3					53			
10 4					54			
10 5					55			
10 6					56			
10 7					57			
10 8					58			
10 9					59			
10 10					60			
10 11	1	1			61			
10 12	1				62			
10 13	1				63			
10 14	2				64			
10 15	1				65			
10 16	1				66			
10 17	1				67			
10 18	2				68			
10 19	1				69			
10 20	1				70			
10 21	1				71			
10 22	2				72			
10 23	1				73			
10 24	1				74			
10 25	1				75			
10 26	2				76			
10 27	4				77			
10 28	1				78			
10 29	1				79			
10 30	1				80			
10 31	1				81			
10 32	1				82			
10 33	1				83			
10 34	1				84			
10 35	1				85			
10 36	1				86			
10 37	1				87			
10 38	1				88			
10 39	1				89			
10 40	1				90			
10 41	1				91			
10 42	1				92			
10 43	1				93			
10 44	1				94			
10 45	1				95			
10 46	1				96			
10 47	2				97			
10 48	5				98			
10 49	5				99			
10 50	1				100			
TOTAL IND.					TOTAL IND.			
TOTAL DEP.					TOTAL DEP.			
TOTAL CLAIMS					TOTAL CLAIMS			

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## INDEX OF CLAIMS

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151		1
152		6
153		2
154		
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FINAL	ORIGINAL	DATE
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